CITY OF CINCINNATI INCOME TAX DIVISION

MAGNETIC MEDIA REPORTING FOR TAX YEAR 2003

**(For submitting annual Form W-2 information
to the City of Cincinnati Income Tax Division)**

CITY OF CINCINNATI
INCOME TAX DIVISION
805 CENTRAL AVENUE SUITE 600
CINCINNATI, OH 45202-5756
(513) 352-3838
Website Address: http://www.rcc.org/citytax
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Prepared: January 2004

INTRODUCTION

The following specifications conform to the Social Security Administration Office of System Requirements Magnetic Media Reporting (MMREF-1) with some minor changes.

Enclosed are copies of these changes to the file specifications. The main changes we are concerned with are:

1) Records Layout Sheets 'RS'

2) Record 'RS' is required by the City of Cincinnati

3) For tax year 2003, wage information will be accepted on following types of media:

   a) 3 1/2" diskette
   b) CD-ROM
   c) DLT tapes
   d) DAT tapes
   e) IBM-standard cartridges (3480/3490).

NOTE: No reel-to-reel tapes will be accepted.

If the information received does not meet the specifications in this document, it may be returned to you unprocessed.

It is advised that you obtain a copy of the Social Security Administration Notice (MMREF-1) mentioned above to use as a reference for those areas not covered in this document. To obtain the Social Security Administration Office of Systems Requirements for Magnetic Media Reporting, call (800) 772-6270, 7:00 A.M. through 7:00 P.M. (Eastern Standard Time), Monday through Friday.

The document is also available online at http://www.ssa.gov/employer/03MMREF1.TXT.

FILING REMINDERS

1) We will not accept compressed files on magnetic tapes and cartridges, or compressed zip files.

2) Be sure to enter the correct tax year in the employer records.

3) The MMREF-1 format is required, as amended by the City of Cincinnati. TIB-4 format will not be accepted. Any submission that does not meet these specifications will be returned to the sender.

4) Record length must be exactly 512 bytes. The record should be padded with blanks to 512 characters if needed, not truncated. Do not add blanks at the beginning of the record, or extend the record past 512 characters. Files submitted on diskette must have MSDOS carriage return/ line feed pairs at the end of the record. Do not place a CR/LF in the middle of a record, and do not include blank records or extra CR/LF pairs. Other than CR/LF all letters must be uppercase.

5) The following record types are required: RA, RE, RW, RS, RT, and RF. There must be at least one RS record for each RW record. There must be an RW record for each set of RS records with the same SSN. All RS records for a given employee must follow that employee's RW record and must be together.

6) The RS record must give the local taxable wages and the local income tax withheld amounts for the City in positions 338-466. A separate entry must be generated for each city within Ohio for which city income tax was withheld. The specifications are designed for the filing of multiple city information. If you are filing for only one municipal, make sure that the entire location segment, 338-466 is filled with blanks when applicable. An RS Record should not be generated for a non-Ohio city.

7) There must only be one file per media item, i.e., one file per diskette, tape or CD-ROM. The entire file must fit on the media chosen. If the submission will not fit uncompressed on a 1.44 MB diskette, then the employer may not choose that medium for his submission. Multi volume submission files will not be accepted.

8) Tapes can have either no internal label or IBM standard internal labels, and can use either the EBCDIC or ASCII character set, but the tape must be clearly marked as to whether it has labels or not and which character set it uses. The tape should also be clearly marked as to the blocksize used; 23040 is preferred.

9) Each submission of W-2 data must be accompanied by one or more City of Cincinnati Form W-3 Wage Reconciliation returns (paper copy required) for each RE record within the submission file. The City of Cincinnati Form W-3 document can be downloaded from our website at: http://www.rcc.org/citytax/2003_w3form.pdf.

10) Paper Form W-2 documents should not be sent if an electronic submission is being transmitted.

11) All files should be mailed to the following address:

> CINCINNATI INCOME TAX DIVISION
> ELECTRONIC W-2 FILING PROGRAM
> 805 CENTRAL AVENUE SUITE 600
> CINCINNATI, OH 45202-5756

GENERAL INFORMATION

What is in this booklet?

Instructions for filing Form W-2 information to the City of Cincinnati on magnetic media using the MMREF-1 format.

Who must use these instructions?

This program is strictly voluntary for tax year 2003. We advise employers who will be submitting Form W-2 information for 100 or more employees to use this program.

May I use these instructions if I have fewer than 100 employees?

Yes. Any employer may file their Form W-2 documentation electronically.

What if I have 100 or more Form W-2s and I send them to you in the paper format?

For tax year 2003, you may either submit your W-2 data file or continue to file paper Form W-2 documents.

What if I do not follow the instructions in this booklet?

Your data file may be returned to you. Your totals of all Form W-2 documents may not match the Form W-3 totals for the year. Your employee wages may not be credited properly.

What clarifications do I need before I read this booklet?

The terms TAPE and 3480/3480E or 3490/3490E CARTRIDGE are used interchangeably, unless otherwise notated.

The term "W-2" refers to the following unless otherwise notated:

W-2, W-2CM, W-2VI, W-2GU, W-2AS, 499R-2/W-2PR

The term "W-3" refers to W-3, W-3SS, and W-3PR

May I send paper copies of Form W-2 and W-3 with my electronic filing?

Do not send paper copies of Form W-2 with your filing. However, you must include a paper copy of Form W-3 Wage Reconciliation with your filing. (The Form W-3 can be downloaded from our website http://www.rcc.org/citytax/2003_w3form.pdf).

How may I send you my Form W-2 information using the MMREF-1 format?

For tax year 2003, the following types of media will be accepted:

      a) 3 1/2" diskette
      b) CD-ROM
      c) DLT tapes
      d) DAT tapes
      e) IBM-standard cartridges (3480/3490).

NOTE: All information must fit onto one (1) media component. No reel to reel tapes will be accepted.

When is my file due to your office?

Magnetic media files are due by March 1, 2004.

What if I file late?

The City of Cincinnati may impose a penalty for late filing of your return. Refer to section 311-99 of the Cincinnati Municipal Code for details.

Will you return the magnetic media to me after the file has been processed?

No files will be returned to you after they have been processed successfully.

Whom should I contact if I have general questions or need assistance with the information in this booklet?

You may contact our office at (513) 352-3838 during the hours of 7:30 A.M. until 5:00 P.M. (EST), Monday through Friday. In addition, you may E-mail our office at tax.webmaster@cincinnati-oh.gov.

FILE DESCRIPTION

General:

What should I name my file?

The file name must be "W2REPORT" is you are filing your information using a diskette. All other types of file submissions do not require a specific file name.

File Requirement:

STATE RECORD (RS):

This record is required. It should follow its related CODE RW record.

If there are multiple City records for an employee, include all of the City records sequentially in positions 338-466. Refer to pages 12 – 15 for the file layout specifications of the RS record

Do not generate this record if only blanks would be entered after the record identifier.

Whom should I call if I have any questions or need assistance about the file description?

You may contact our office at (513) 352-3838 during the hours of 7:30 A.M. until 5:00 P.M. (EST), Monday through Friday. In addition, you may E-mail our office at tax.webmaster@cincinnati-oh.gov.

RECORD SPECIFICATIONS

General:

What is the length of each record?

512 bytes

What is the recommended maximum number of records for an MMREF-1 file?

500,000 records

What case letters must I use?

UPPER CASE letters only throughout the file

Your instructions address the format for the fields in the records I have to create. How do I know exactly what should be in each field?

If you need assistance completing the various fields, refer to the Social Security Administration website:

http://www.ssa.gov/employer

RULES

What rules do you have for alpha/numeric fields?

Left justify and fill with blanks. Where the field shows "blank," all position must be blank, not zeroes.

What rules do you have for money fields?

Numerics only
No punctuation
No signed amounts (high order signed or low order signed)
Include both dollars and cents with the decimal point assumed
Do not round to the nearest dollar (Example: $1,250.00 = 00000125000).
Right justify and zero fill to the left
The field must contain zeroes if not applicable

What rules do you have for the address fields?

Fields equate to lines of address printed on correspondence. They must conform with United States Postal Service (USPS) guidelines. You may contact U.S. Post Office by calling them at (800) 275-8777 or by using their website, www.usps.gov.

For State abbreviations, use only the standard two letter abbreviations. For the Greater Cincinnati Municipal codes, refer to the Supplement #1 at the end of this document.

What rules do you have for the format of the employee name?

The employee name must be the same name shown on the individual's Social Security card. The employee name must be submitted in the individual name fields:

- Employee First Name
- Employee Middle Name or Middle Initial
- Employee Last Name
- Suffix

Do not include any titles.

What rules do you have for the SSN?

Use the number shown on the original or replacement Social Security card.
Only numeric characters
Omit hyphens, prefixes and suffixes
May not begin with 8 or 9.
May not be 111111111, 333333333, or 123456789

For valid number ranges, check the latest list of newly issued Social Security number ranges from their website: http://www.ssa.gov/employer. (Select SSN Verification and then High Group List).

If the SSN is not available, enter zeroes (0) in locations 3-11 on the RW record and in Location 10-18 on the RS Record.

PURPOSE

What is the purpose of the RS State record?

The field is normally submitted to the State to report revenue, taxation, and quarterly unemployment compensation data for state and local municipalities. The City of Cincinnati requires the RS record for the purpose of reporting taxable wages and income tax withheld for local municipalities.

Whom should I call if I have any questions or need assistance about the record specifications?

You may contact our office at (513) 352-3838 during the hours of 7:30 A.M. until 5:00 P.M. (EST), Monday through Friday. In addition, you may E-mail our office at tax.webmaster@cincinnati-oh.gov.

CODE RS—STATE RECORD

NOTE: Record 'RS' is required by the City of Cincinnati, which will include local taxable wages, local income tax withheld, and Entity codes. (Refer to Supplement #1 for Greater Cincinnati Municipal Codes). There is room to report up to four different municipalities within one RS Record.

The RS Record is required by the City of Cincinnati. It should follow its related CODE RW record.
If there are multiple City records for an employee, include all records sequentially in positions 338-466.

LOCATION	FIELD	LENGTH	SPECIFICATIONS
1 – 2	Record Identifier	2	Constant "RS"
3 – 4	State Code	2	Enter the appropriate postal Numeric Code.
5 – 9	Blank	5	Fill with blanks
10 –18	Social Security Number (SSN)	9	Enter the employee's social security number as shown on the original/replacement SSN card issued by SSA. If no SSN is available, enter zeroes.
19 – 33	Employee First Name	15	Enter the employee's first name as shown on the social security card. Left justify and fill with blanks.
34 – 48	Employee Middle Name or Initial	15	If applicable, enter the employee's middle name or initial as shown on the social security card. Left justify and will with blanks. Otherwise, fill with blanks.
49 – 68	Employee Last Name	20	Enter the employee's last name as shown on the Social Security card. Left justify and fill with blanks.
69 – 72	Suffix	4	If applicable, enter the employee's alphabetic suffix. For example: SR or JR. Left justify and fill with blanks. Otherwise, fill with blanks.
73 – 94	Location Address	22	Enter the employee's location address (Attention, Suite, Room Number, etc.). Left justify and fill with blanks.
95 – 116	Delivery Address	22	Enter the employee's delivery address. Left justify an fill with blanks.
117 – 138	City	22	Enter the employee's city. Left justify and fill with blanks.
139 – 140	State Abbreviation	2	Enter the employee's state. Use a standard postal abbreviation codes (2-digits). For a foreign address, fill with blanks.
141 – 145	Zip Code	5	Enter the employee's zip code. For a foreign address, fill with blanks.
146 – 149	Zip Code Extension	4	Enter the employee's four-digit extension of the zip code. If not applicable, fill with blanks.
150 – 154	Blank	5	Fill with blanks. Reserved for SSA use.
155 –177	Foreign State/Province	23	If applicable, enter the employee's foreign state/province. Left justify and fill with blanks. Otherwise, fill with blanks.
178 – 192	Foreign Postal Code	15	If applicable, enter the employee's foreign postal code. Left justify and fill with blanks. Otherwise, fill with blanks.

193 – 194	Country Code	2	If one of the following applies, fill with blanks. • One of the 50 states of the USA • District of Columbia • Military Post Office (MPO) • American Samoa • Guam • Northern Mariana Islands • Puerto Rico • Virgin Islands
Locations 195 to 267 apply to unemployment reporting			
195 – 196	Blank	2	Fill with blanks
197 – 202	Reporting Period	6	Enter the last month and 4-digit year for the calendar quarter for which this report applies. (Example: "032002" for January through March 2002).
203 – 213	State Quarterly Unemployment Insurance Total Wage	11	Right justify and zero fill.
214 – 224	State Quarterly Unemployment Insurance Total Taxable Wages	11	Right justify and zero fill.
225 – 226	Number of Weeks Worked	2	Defined by State/Local agency.
227 – 234	Date First Employed	8	Enter the month, day, and the four-digit year. (Example: "01312002")
235 – 242	Date of Separation	8	Enter the month, day, and the four-digit year. (Example: "01312002")
243 – 247	Blank	5	Fill with blanks. Reserved for SSA use.
Locations 248 to 307 apply to Wages Earned in Ohio			
248 – 267	State Employer Account Number	20	Required field. Numeric characters only. Omit hyphens. Right justify an fill with blanks.
268 – 273	Blank	6	Fill with blanks. Reserved for SSA use.
274 – 275	State Code	2	Enter the appropriate postal numeric code. (Example: Ohio = "39")
276 – 286	Ohio Taxable Wages	11	Right justify and zero fill.
287 – 297	Ohio Income Tax Withheld	11	Right justify and zero fill.
298 – 307	Gross Total Wages, Tips and Other Compensation	10	Enter the employee's total annual wages, tips and other compensation.

Locations 308 to 337 apply to School District Income Tax			
308	Tax Type Code	1	Enter the appropriate code for entries in fields 309 – 319 and 320 – 330: C = City Income Tax D = County Income Tax E = School District Tax F = Other Income Tax
309 – 319	Local Taxable Wages	11	Right justify and zero fill. (Per School District if code E in location 308.
320 – 330	Local Income Tax Withheld	11	Right justify and zero fill. (Per School District if code E in location 308.
331– 337	School District Number	7	Enter the 4-digit School District number. Right justify and fill with blanks. Listing of School District Numbers can be found at the following State of Ohio website: http://www.state.oh.us/tax/individual_taxes_SD_list.html in the IT-1040 booklet or the SD-100 booklet.
Locations 338 to 466 apply to City of Cincinnati Income Tax			
338 – 342	Entity Code (for Municipality #1)	5	Enter the Alpha Code for the municipality. (Refer to Supplement #1 for a listing of the codes in the Greater Cincinnati area).
343 – 353	Local Taxable Wages (for Municipality #1)	11	Enter the local taxable wage amount reported to the City identified in Location 338 - 342.
354 – 364	Local Income Tax Withheld (for Municipality #1)	11	Enter the local income tax withheld amount reported to the City identified in Location 338 – 342.
365 – 369	Entity Code (for Municipality #2 if applicable)	5	Enter the Alpha Code for the municipality. (Refer to Supplement #1 for a listing of the codes in the Greater Cincinnati area).
370 – 380	Local Taxable Wages (for Municipality #2 if applicable)	11	Enter the local taxable wage amount reported to the City identified in Location 365 – 369.
381 – 391	Local Income Tax Withheld (for Municipality #2 if applicable)	11	Enter the local income tax withheld amount reported to the City identified in Location 365 – 369.
392 – 412	Blank	21	Fill with blanks
413 – 417	Entity Code (for Municipality #3 if applicable)	5	Enter the Alpha Code for the municipality. (Refer to Supplement #1 for a listing of the codes in the Greater Cincinnati area).
418 – 428	Local Taxable Wages (for Municipality #3 if applicable)	11	Enter the local taxable wage amount reported to the City identified in Location 413 - 417.
429 – 439	Local Income Tax Withheld (for Municipality #3 if applicable)	11	Enter the local income tax withheld amount reported to the City identified in Location 413 – 417.

440 – 444	Entity Code (for Municipality #4 if applicable)	5	Enter the Alpha Code for the municipality. (Refer to Supplement #1 for a listing of the codes in the Greater Cincinnati area).
445 – 455	Local Taxable Wages (for Municipality #4 if applicable)	11	Enter the local taxable wage amount reported to the City identified in Location 413 - 417.
456 – 466	Local Income Tax Withheld (for Municipality #4 if applicable)	11	Enter the local income tax withheld amount reported to the City identified in Location 413 – 417.
467 – 487	Blank	21	Fill with blanks
488 – 512	Blank	25	Fill with blanks. Reserved for SSA use.

DISKETTE or CD-ROM FILING—MEDIA REQUIREMENTS

What are the media requirements for diskettes, CD-ROMs, and tapes?

DISKETTE: 3 1/2" diskette, MS-DOS compatible "double density, 1.44 megabytes"

                    If a diskette was used previously for other data, reformat it before using it. Do not make it a bootable disk. Virus scan the diskette before submission.

CD-ROM :   CD-ROM Mode 1 is the mode used for CD-ROMs that carry data and applications only. Do not create the CD-R with the option that it must always be read from a specific disc drive letter.

DLT TAPE : 35/70 GB DLT tape or lower capacity tape with 35 or less GB native capacity. Do not use compression.

DAT TAPE: 4/8 GB DAT tape or lower capacity tape with 4 or less GB native capacity. Do not use compression.

DISKETTE/CD-ROM FILING—DATA REQUIREMENTS

What are the data requirements for diskettes?

Data must be recorded in the American Standard Code for Information Interchange-1 (ASCII-1) character set. (Refer to Appendix D).

The file name **W2REPORT** must be in the root directory.

Do not add an extension (.dat or .bak).

Do not include more than one W2REPORT file per diskette.

Do not include any other files on the diskette.

If the number of data records exceeds the capacity of a single diskette, then this method of record submission cannot be used.

We encourage you to file combined reports to avoid creating a separate file and a diskette for each employer by filing many employer's reports on a single diskette, or set of diskettes. (Review Appendix C, examples 2, 4, 6, 8, 10, and 12 to see how multiple employers can be combined into one file).

We prefer files without record delimiters. If record delimiters are used (CR—Carriage Return followed by LF—Line Feed), they must follow the last character of each record except the Code RF record.

If you use record delimiters using a sequential file, the following requirements apply:

> Do not place record delimiters after a field within a record.

> Do not place a record delimiter before the first record of the file.

> A record delimiter should appear immediately after the last character of each record.

> The record delimiter must consist of two characters and those two characters must be carriage return and line feed (CR/LF).

> The ASCII-1 hexadecimal value for the carriage return character is 0D (zero and letter D); the ASCII-1 hexadecimal value for the line feed is 0A (zero and letter A). The ASCII-1 decimal values for the two characters are 13 and 10, respectively.

> The carriage return character and the line feed character must be placed in positions 513 and 514, respectively.

> Do not place more than one record delimiter (more than one carriage return/line feed combination) following a record.

> If information is reported using a random file, the record length must be exactly 512 bytes.

May I compress the file I send you on a diskette or CD-ROM?

No

How do I label my diskette/CD-ROM?

Affix an external label like the one shown. Label fill-ins must agree with the Code RA record data.
Instructions for the label are as follows:

EIN	Enter Submitter's EIN
NAME	Enter Submitter's name
CITY	Enter Submitter's city
ST	Enter Submitter's state
ZIP CODE	Enter Submitter's zip code
PHONE NUMBER	Enter Submitter's telephone number

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SSA   AWR   MMREF-1
EIN: _____
NAME: _____
CITY: _____  ST: _____
ZIP CODE: _____  PHONE NUMBER: _____
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How should I package my diskette/CD-ROM?

Do not use paper clips, rubber bands, or staples on the diskettes.
Insert each diskette in its own protective sleeve before packaging.
Send the diskette in a container to prevent damage in transit.
Use disposable containers. Special mailers for diskettes are available commercially.
We will not return special containers.

Where do I send my diskette/CD-ROM?

Using the U.S. Mail Service, send your diskettes to the following address:

> CINCINNATI INCOME TAX DIVISION
> ELECTRONIC W-2 FILING PROGRAM
> 805 CENTRAL AVENUE SUITE 600
> CINCINNATI, OH 45202-5756

We suggest that you request a return receipt as part of your mailing process.

Whom should I call if I have questions or need assistance with filing my data?

You may contact our office at (513) 352-3838 during the hours of 7:30 A.M. until 5:00 P.M. (EST), Monday
through Friday. In addition, you may E-mail our office at tax.webmaster@cincinnati-oh.gov.

SUPPLEMENT #1--GREATER CINCINNATI MUNICIPALITY CODES
(To be used within the RS Record layout for the Entity Code fields)

Listed below are the municipality codes that are frequently used within the Greater Cincinnati area.

MUNICIPALITY	ALPHA CODE	MUNICIPALITY	ALPHA CODE
Addyston Village Income Tax	ADDYS	Madeira City Income Tax	MADEI
Amberley Village Income Tax	AMBER	Mariemont Village Income Tax	MARIE
Arlington Heights Village Income Tax	ARLIH	Mason City Income Tax	MASON
Blue Ash City Income Tax	BLUEA	Miamisburg City Income Tax	MIAMI
Centerville City Income Tax	CENTV	Middletown City Income Tax	MIDCT
Cheviot City Income Tax	CHEVI	Milford City Income Tax	MILFO
Cincinnati City Income Tax	CINCI	Monroe City Income Tax	MONRO
Dayton City Division of Taxation	DAYTO	Montgomery City Income Tax	MONTG
Deer Park City Income Tax	DEERP	Morrow Village Income Tax	MORRO
Elmwood Place Village Income Tax	ELMWO	Mount Healthy City Income Tax	MOUNH
Evendale Village Income Tax	EVEND	Mount Orab Village Income Tax	MOUNO
Fairfax Village Income Tax	FAIRF	Norwood City Income Tax	NORWC
Fairfield City Income Tax	FAIRC	Oxford City Income Tax	OXFOR
Felicity Village Income Tax	FELIC	Reading City Income Tax	READI
Forest Park City Income Tax	FOREP	Saint Bernard City Income Tax	STBER
Georgetown Village Tax	GEORG	Sharonville City Income Tax	SHARO
Golf Manor Village Income Tax	GOLFM	Springboro City Income Tax	SPRIN
Greenhills Village Income Tax	GREEH	Springdale City Income Tax	SPRID
Hamilton City Income Tax	HAMIL	Tipp City Income Tax	TIPPC
Harrison City Income Tax	HARRS	Trotwood City Income Tax	TROTW
Indian Hill Village Income Tax	INDIA	Vandalia City Income Tax	VANDA
Kettering City Income Tax	KETTE	West Carrollton City Income Tax	WCARR
Lebanon City Income Tax	LEBAN	Wilmington City Income Tax	WILTA
Lincoln Heights Village Income Tax	LINCO	Woodlawn Village Income Tax	WAGET
Lockland Village Income Tax	LOCKL	Wyoming City Income Tax	WYMIG
Loveland City Income Tax	LOVEL	Xenia City Income Tax	XENIA

CITY OF CINCINNATI
INCOME TAX DIVISION

MAGNETIC MEDIA W-2 TRANSMITTAL FORM

COMPLETE THIS FORM AND SEND IT ALONG WITH YOUR FILE TO:

CINCINNATI INCOME TAX DIVISION
ELECTRONIC W-2 FILING PROGRAM
805 CENTRAL AVENUE SUITE 600
CINCINNATI, OH 45202-5756

EMPLOYER NAME:	FEDERAL ID NUMBER:
STREET ADDRESS:	TAX YEAR REPORTED:
CITY/STATE/ZIP CODE:	NUMBER OF EMPLOYEES REPORTED:
CONTACT PERSON:	JOB TITLE:
CONTACT PHONE NUMBER:	CONTACT FAX NUMBER:
TOTAL LOCAL WAGES:	TOTAL LOCAL TAX WITHHELD:

TYPE OF MEDIA ON WHICH INFORMATION WILL BE REPORTED

MAGNETIC TAPE or CARTRIDGE

☐ DAT Tape   ☐ DLT Tape   ☐ 3480/3490 Cartridge

Recording Code	Label	Record Length	**Blocking Factor**
☐ EBCDIC ☐ ASCII	☐ None ☐ Standard	512	

PC DISKETTE and CD-ROM

☐ 3.5" Diskette   ☐ CD-ROM

FILE NAME (S): _____

DOES YOUR FILE (S) CONTAIN THE CARRIAGE RETURN/LINE FEED RECORD DELIMITERS?   YES   NO

COMMENTS:
_____
_____
_____